



## PART B - FEE(S) TRANSMITTAL

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30778 7590 03/09/2005

LAW OFFICE OF ROXANA H. YANG  
 P.O. BOX 400  
 LOS ALTOS, CA 94023

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Roxana Yang	(Depositor's name)
<i>Roxana Yang</i>	(Signature)
3-24-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/838,822	04/19/2001	Balas Nataraajan Kausik	053560-0004	2820

TITLE OF INVENTION: METHOD AND SYSTEM FOR PARAMETERIZED WEB DOCUMENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BASHORE, WILLIAM L	2176	715-513000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. PatentEsque Law Group, LLP  
 2. Roxana H Yang  
 3.

3. ASSIGNER NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Fine Ground Networks

Campbell, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 524557 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(e)(2).

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